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SB Data Sheet

CONFIRMATION NO. 3213

SERIAL NUMBER 10/052,800	FLING DATE 40/29/2001 RULE	CLASS 455	GROUP ART UNIT 2681	ATTORNEY DOCKET NO. CM04283H						
APPLICANTS Stephen Harold Sanders III, Glenview, IL; Paul M. Bocci, Roselle, IL; Gregory A. Dertz, Algonquin, IL;										
CONTINUING DATA										
FOREIGN APPLICATIONS <i>None of</i>										
IF REQUIRED, FOREIGN FILING LICENSE GRANTED 02/15/2002										
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no US USC 119 (b)-(4) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Not other Verified and Acknowledged <i>af</i> Examiner's Signature _____		STATE OR COUNTRY IL	SHEETS DRAWING 6	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3					
ADDRESS 22917										
TITLE Service management agent for managing the provision of different services to a communication device										
FILING FEE RECEIVED 740	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: <table border="1"> <tr> <td><input type="checkbox"/> All Fees</td> </tr> <tr> <td><input type="checkbox"/> 1.16 Fees (Filing)</td> </tr> <tr> <td><input type="checkbox"/> 1.17 Fees (Processing Est. of time)</td> </tr> <tr> <td><input type="checkbox"/> 1.18 Fees (Issue)</td> </tr> <tr> <td><input type="checkbox"/> Other _____</td> </tr> <tr> <td><input type="checkbox"/> Credit _____</td> </tr> </table>				<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Est. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit _____
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